

REMARKS

Applicant respectfully requests reconsideration of the present application in view of the foregoing amendments and in view of the reasons that follow.

Claims 11, 14, and 28 are rewritten in independent form, of which Claims 14 and 28 are also being amended.

Claims 1, 8, 20, 21, 25, 31, 33, and 37 are currently being amended.

Claims 40-61 are being added.

After amending the claims as set forth above, claims 1-61 are now pending in this application.

Amendments to the Claims

A. Claims 1 and 20

Claims 1, 20, and 33 have been amended to recite “a plurality of ECG waveforms.” This amendment is being made due to a difference in the reading of the claim language between Applicant’s representatives and the examiner. Applicant’s originally intended “a plurality of ECG signals from the patient” acquired from “a multi-lead electrocardiogram” to mean more than one physiological signal (waveform) is acquired because more than one path may be taken. The examiner is believed to read “a plurality of ECG signals from the patient” acquired from “a multi-lead electrocardiogram” to include a system where two electrodes each produce a signal. Claims 1 and 20 have been amended due to this apparent limitation in language that lead to the different readings of Claims 1 and 20 by Applicant’s representatives and the examiner.

B. Claims 1, 8, 20, 21, 25 and 37

Claims 1, 8, 20, 21, 25 and 37 have been amended to remove redundant references to claim elements. These amendments are made based on a preference of language form and do not narrow the scope of the claim where the amendment was made. Further, these amendments are not made for reasons related to the patentability of these claims.

C. Claims 14, 28, and 37

Claims 14, 28, and 37 have been amended to clarify the meaning of the claims, and not to overcome a rejection made by the examiner.

Claim Rejections – 35 U.S.C. § 102

A. Claims 1-39 in view of Solar 7000/8000 Patient Monitor Operator's Manual

On page 2 of the Office Action, Claims 1-39 were rejected under 35 U.S.C. § 102(a) as being anticipated by the Solar 7000/8000 Patient Monitor Operator's Manual.

Claims 1-10, 12-20, and 28-39

The Solar 7000/8000 Patient Monitor Operator's Manual is not prior art to Claims 1-10, 12-20, and 28-39 of the present application. To be prior art under 35 U.S.C. § 102(a), a document must be before the date of invention of the inventor. As recognized in the MPEP if a document is a result of the invention by the inventor, the document cannot be before the date of invention by the inventor. MPEP § 716.10. As stated in the attached declaration, the Solar 7000/8000 Patient Monitor Operator's Manual is a document created by GE Medical Systems to support the Solar 7000/8000 Patient Monitor which is a GE Medical Systems product. As further stated in the declaration, the inventor is an employee of GE Medical Systems, and the disclosure of the Solar 7000/8000 Patient Operator's Manual that anticipates the present claims is a reduction to practice of an invention that was invented by the inventor. Thus, the portions of the Solar 7000/8000 Patient Operator's Manual that anticipate Claims 1-10, 12-20, and 28-39 are attributable to the inventor of those claims and do not qualify as prior art under § 102(a). The rejection of Claims 1-10, 12-20, and 28-39 as being anticipated by the Solar 7000/8000 Patient Monitor Operator's Manual is respectfully traversed.

A copy of the previous Solar 7000/8000 Patient Monitor Operator's Manual which does not include non-invasive cardiac output is being provided for your reference in an IDS.

Claims 11 and 21-27

Claims 11 recites a “communication interface is capable of wirelessly connecting the patient monitoring system to the local area network.” The Solar 7000/8000 Patient Monitor Operator’s Manual does not describe a communication interface capable of wirelessly connecting the patient monitor to the local area network. Rather, the Solar 7000/8000 Patient Monitor Operator’s Manual teaches that the Solar 7000/8000 Patient Monitor is connected to a network using a wired connection. See pages 1-10, 1-14, 1-23, and 1-24. Since Claim 11 recites at least one element not taught by the Solar 7000/8000 Patient Monitor Operator’s Manual, Claim 11 is not anticipated by the Solar 7000/8000 Patient Monitor Operator’s Manual. The rejection of Claim 11 as being anticipated by the Solar 7000/8000 Patient Monitor Operator’s Manual is respectfully traversed.

Claim 21 (as amended) recites a similar limitation to Claim 11 and would overcome the rejection under 35 U.S.C. § 102(a) over the Solar 7000/8000 Patient Monitor Operator’s Manual for reasons similar to Claim 11. Specifically, Claim 21 recites “a communication interface capable of establishing a wireless communication link between the patient monitoring system and a local area network of a medical facility in which the patient monitoring system is located.” Claims 22-27 depend from Claim 21 and overcome the rejection for at least the same reasons as Claim 21. The rejection of Claims 21-27 as being anticipated by the Solar 7000/8000 Patient Monitor Operator’s Manual is respectfully traversed.

It is noted that this is the only rejection of Claims 14-19, 28-30, and 37-39. Claims 14 and 28 have been rewritten in independent form. Allowance of Claims 14-19, 28-30, and 37-39 is respectfully requested.

B. Claims 1-7 and 20 in view of Wang et al.

On page 2 of the Office Action, Claims 1-7 and 20 were rejected under 35 U.S.C. as being anticipated by U.S. Pat. No. 5,309,917 to Wang et al. Claim 1 (as amended) recites “a display... configured to display the value pertaining to cardiac output and a plurality of ECG waveforms.” Wang et al. does not disclose a display configured to display the value

pertaining to cardiac output and a plurality of ECG waveforms. Rather, Wang et al. teaches a dZ/dt signal displayed along with a single ECG waveform. Col. 7, lines 56-58 and Fig. 1. Further, Wang et al. does not suggest that a plurality of ECG waveforms should be displayed nor does Wang et al. provide any motivation to display a plurality of ECG waveforms. Thus, Claim 1, and Claims 2-7 which depend from Claim 1, are believed to overcome the rejection of Claims 1-7 under 35 U.S.C. § 102(b) as being anticipated by Wang et al.

Claim Rejections – 35 U.S.C. § 103

On page 3 of the Office Action, Claims 8-13, 21-27, and 31-36 were rejected under 35 U.S.C. § 103(a) as being unpatentable over U.S. Pat. No. 6,221,012 to Maschke et al. in view of U.S. Pat. No. 5,309,917 to Wang et al.

A. Claims 8-10, 12, and 13

Claims 8-10, 12, and 13 depend from Claim 1 (as amended) which recites “a display... configured to display the value pertaining to cardiac output and a plurality of ECG waveforms.” As discussed above with respect to the § 102 rejection of Claim 1 above, Wang et al. does not teach or suggest a display configured to display the value pertaining to cardiac output and a plurality of ECG waveforms. Further, Maschke et al. does not teach or suggest displaying both the value pertaining to cardiac output and a plurality of ECG waveforms. Rather, Maschke only teaches or suggests “a display device adapted to display first and second waveforms representing cardiac output data and blood oxygen saturation levels” and “a display device adapted for displaying first and second waveforms representing blood pressure and pulmonary artery wedge pressure.” See Claims 4 and 5. Further still, nothing in the combination of Maschke et al. and Wang et al. suggests displaying both the value pertaining to cardiac output and a plurality of ECG waveforms. Thus, the rejection of Claims 8-10, 12, and 13 is respectfully traversed.

B. Claim 11

Claim 11 recites “wherein the patient monitor console is portable and the communication interface is capable of wirelessly connecting the patient monitoring system to the local area network.” Maschke et al. does not teach that the communication interface is capable of wirelessly connecting the patient monitoring system to the local area network. Rather, Maschke et al. teaches a docking station or wall box is used to connect the monitor to the local area network. Col. 14, line 36 to Col. 15, line 13. See also, Col. 15, lines 15-64. Further, Wang et al. does not teach or suggest transferring data across a network. Further still, nothing in the combination of Maschke et al. or Wang et al. teaches or suggests wirelessly transferring data across a network. Thus, Claim 11 is believed to overcome the rejection over Maschke et al. in view of Wang et al. for at least this reason.

C. Claims 21-27

Claim 21 (as amended) recites a limitation similar to Claim 11 and is believed to be allowable for reasons similar to those listed above for Claim 11. Specifically, Claim 21 recites “a communication interface capable of establishing a wireless communication link between the patient monitoring system and a local area network of a medical facility.” Claims 22-27 depend from Claim 21 and are believed to overcome the rejection over Maschke et al. in view of Wang et al. for at least the same reasons as Claim 21.

D. Claims 31 and 32

Claims 31 and 32 have been amended to depend from Claim 28. As recognized by the Office Action, Claim 28 is not rendered obvious by Maschke et al. in view of Wang et al. Claims 31 and 32 are believed to be allowable over Maschke et al. in view of Wang et al. for at least the same reasons as Claim 28.

E. Claims 33-36

Claim 33 recites elements similar to those recited above for Claims 7-13, and is believed to be allowable for reasons similar to those listed above for Claims 7-13. Specifically, Claim 33 recites “displaying a plurality of ECG waveforms and the cardiac

output information on a display.” Claims 34-36 depend from Claim 33 and are allowable for at least the same reasons as Claim 33.

New Claims

Claims 40-61 have been added. Claims 40-61 are supported by the specification as filed and are believed to be allowable over the cited references. Claims 40 and 41 are supported by at least original Claim 1 and by the specification at at least paragraph [0044]. Claims 42-45 are supported by the specification at paragraph [0079] and [0080]. Claims 46 to 50 are supported by at least original Claims 14-19 and by the specification at at least paragraphs [0047] and [0048]. Claims 51-53 are supported by the specification at at least paragraph [0046]. Claims 54 and 55 are supported by the specification at at least paragraphs [0046]. Claim 56 is supported by the specification at at least paragraph [0050]. Claims 57-59 are supported by the specification at at least paragraphs [0051] and [0053] and by Fig. 6. Claims 60 and 61 are supported by the specification at at least paragraph [0060].

Conclusion

Applicant believes that the present application is now in condition for allowance. Favorable reconsideration of the application as amended is respectfully requested.

The Examiner is invited to contact the undersigned by telephone if it is felt that a telephone interview would advance the prosecution of the present application.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-2401. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to

Deposit Account No. 50-2401. If any extensions of time are needed for timely acceptance of papers submitted herewith, Applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-2401.

Respectfully submitted,

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